

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Communications Workers of America Working Voices		FEC IDENTIFICATION NUMBER ▼ C C00488486	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Berlin Rosen LTD			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 05 / 2016		
Mailing Address 15 Maiden Lane, Suite 803			Amount 8333.33		
City New York	State NY	Zip Code 10038	Transaction ID : D33509		
Purpose of Expenditure Mailers		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 28 / 2016		
Name of Federal Candidate Kirkpatrick, Ann, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: AZ		
Calendar Year-To-Date Per Election for Office Sought 39931.71			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Tell That Story			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 05 / 2016		
Mailing Address 2120 Huntington Drive, Suite B			Amount 6963.15		
City South Pasadena	State CA	Zip Code 91030	Transaction ID : D33498		
Purpose of Expenditure Direct Voter Contact - Text Msg.		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 11 / 04 / 2016		
Name of Federal Candidate Kirkpatrick, Ann, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: AZ		
Calendar Year-To-Date Per Election for Office Sought 39931.71			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	15296.48
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Steffens, Sara, , ,

[Electronically Filed]

Date

MM / DD / YYYY
11 / 06 / 2016

Signature